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CONFIRMATION NO. 1215

|  |   |                               |   |                                     |
|--|---|-------------------------------|---|-------------------------------------|
| <b>SERIAL NUMBER</b><br>10/774,222   | <b>FILING OR 371(c) DATE</b><br>02/05/2004<br><b>RULE</b>   | <b>CLASS</b><br>606           | <b>GROUP ART UNIT</b><br>3739   | <b>ATTORNEY DOCKET NO.</b><br>CB-16 |
| <b>APPLICANTS</b><br>Jean Woloszko, Mountain View, CA;<br>Robert Dahla, Sunnyvale, CA;<br>Michael A. Baker, Woodside, CA;<br>James L. Pacek, Coto De Caza, CA;   |   |                               |   |                                     |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/445,405 02/05/2003 <i>up</i>  |   |                               |   |                                     |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>None up</i>   |   |                               |   |                                     |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 06/14/2004</b>   |   |                               |   |                                     |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>Michael A. Baker</i><br>Examiner's Signature <i>Michael A. Baker</i> Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>51           |
| <b>INDEPENDENT CLAIMS</b><br>3   |   |                               |   |                                     |
| <b>ADDRESS</b><br>021394   |   |                               |   |                                     |
| <b>TITLE</b><br>Temperature indicating electrosurgical apparatus and methods   |   |                               |   |                                     |
| <b>FILING FEE RECEIVED</b><br>1578   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                     |